

JUN 05 2006

PTO/SB/21 (08-00)

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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Complete If Known		
		Application Number	10/788,834	
		Filing Date	February 27, 2004	
		First Named Inventor	Matthijs H. Keuper	
		Examiner Name:	Allcia M. Harrington	
		Group Art Unit	2873	
Total Number Of Pages In This Submission (including this Transmittal Form)		18	Attorney Docket No.:	LUM-04-01-04

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (1 page)	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached (Credit Card Form - 1 page)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply (14 pages)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declarations	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request (1 page)	<input type="checkbox"/> Power of Attorney, Revocation of Previous Powers; And Statement Under 37 CFR 3.73(b)	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT	
Firm or Individual Name	Michael J. Halbert (Reg. No. 40,633) Silicon Valley Patent Group LLP 2350 Mission College Boulevard, Suite 360 Santa Clara, California 95054
Signature	
Date	June 5, 2006

CERTIFICATE OF FACSIMILE TRANSMISSION	
I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office to the fax number 571-273-8300 on June 5, 2006.	
	6-5-06
Attorney for Applicant(s)	Date of Signature

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Modified PTO/SB/17 (10-04v2)

FEE TRANSMITTAL

for FY 2006

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 520

Complete If Known

Application Number	10/789,834
Filing Date	February 27, 2004
First Named Inventor	Matthijs H. Keuper
Examiner Name:	Alicia M. Harrington
Group Art Unit	2873
Attorney Docket No.:	LUM-04-01-04

METHOD OF PAYMENT

☐ Check ☒ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

 Deposit
Account
Number

50-2263

 Deposit
Account
Name

Silicon Valley Patent Group LLP

The Director is authorized to: (check all that apply)

☐ Charges fees(s) indicated below ☒ Credit any Overpayments

☒ Charges any additional fee(s) or any underpayment of fee(s)

☐ Charges fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee		Small Entity Fee		Fee Description	Fee Paid
Code	(\$)	Code	(\$)		
1001	780	2001	395	Utility Filing Fee	
1002	350	2002	175	Design Filing Fee	
1003	550	2003	275	Plant Filing Fee	
1004	790	2004	395	Reissue Filing Fee	
1005	160	2005	80	Provisional Filing Fee	
SUBTOTAL (1)				(\$)	

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claim	Fee from below	Fee Paid
30	0	0	0
Independent Claims	8	2	400
Multiple Dependent			

Large Entity Fee		Small Entity Fee		Fee Description
Code	(\$)	Code	(\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	380	2203	180	Multiple dependent claim, if not paid
1204	88	2204	44	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$) 400.00

** or number previously paid if greater, For Reissues see above

FEE CALCULATION (continued)

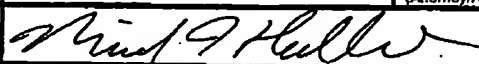
3. ADDITIONAL FEES

Large Entity Fees		Small Entity Fees		Fee Description	Fees Paid
Code	(\$)	Code	(\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	2053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Extension for reply within one month	120
1252	450	2252	225	Extension for reply within second month	
1253	1020	2253	510	Extension for reply within third month	
1254	1590	2254	785	Extension for reply within fourth month	
1255	2,160	2255	1080	Extension for reply within fifth month	
1401	340	2401	170	Notice of Appeal	
1402	340	2402	170	Filing a brief in support of an appeal	
1403	300	2403	150	Request for oral hearing	
1451	1,510	2451	1,510	Petition for a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,370	2453	685	Petition to revive - unintentional	
1501	1,370	2501	685	Utility Issue fee (or reissue)	
1502	480	2502	245	Design issue fee	
1503	660	2503	330	Plant issue fee	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	2807	50	Processing fee for provisional applications	
1806	180	2806	180	Submission of Information Disclosure Statement	
8021	40	28021	40	Recording each patent assignment per properties (times number of properties)	
1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	790	2901	395	Request for Continued Examination (RCE)	
1802	900	2902	900	Request for expedited examination of a design application	
Other Fee (specify)					

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 120

Submitted By

Name (Print/Type)	Michael J. Halbert	Registration No. (Attorney/Agent)	40,633	Telephone	(408) 982-8202
Signature		Date	June 5, 2006		